Harry & Lois Fry Memorial Scholarship (\$500)

Requirements for Applicants

The applicant must ...

- 1. be a graduating senior of Gate City High School and planning to enroll as a full-time (a minimum of 12 hours) student at an accredited two or four-year undergraduate college or university
- 2. be an average or above student in class work
- 3. possess physical and mental conditions which would enable him/her to pursue studies and major in the area of choice
- 4. submit a copy of their high school transcript
- 5. have excellent moral character
- submit two written references, one by each of the following: (A) school official (B) community leader or minister (No family members)

Consideration will be given to ...

- 1. participation in specific civic and community affairs which you may name
- 2. financial circumstances

REMEMBER: Submit to guidance counselor by May 3,2024

- 1. completed application
- 2. two letters of reference
- 3. ask your guidance counselor to prepare and submit your high school transcript
- 4. One page essay describing you education or professional goals

The committee, composed of Mrs. Lou Britt; and Mr. Keener Fry, and their children will select the recipient of the scholarship. The check for the scholarship will be presented to the recipient prior to the start of the 2024 academic year. The scholarship is for one academic year only.

Harry & Lois Fry Memorial Scholarship Application Form

I wish to apply for the Harry & Lois Fry Scholarship for the academic year $20_{-} - 20_{-}$.

(La	st)	(First)	(Middle)	
2. Home Add	lress:			
3. Date of Bi	rth:			
4. High Scho	ol:			
	any awards, hono high school:	ors, or leadership re	cognition that you h	ave
6. List any ex	tracurricular acti participated:	vities, including sp	orts and hobbies in v	vhich
you have p				
	erience (if applica			-

- 8. Parent Information: (Please note if parents have separate addresses)
- a. Father's name: b. Address: c. Employed (yes/no) Occupation d. Mother's name: e. Employed _____ (yes/no) Occupation 9. I plan to attend _____ The address of the college is _____ I have been accepted at this institution ____ (yes/no) Field of study 10. Essay Section: (Attach a separate sheet with your response. Please print
- *or type.)*

Please describe your educational and professional goals in one page or less.

11. Financial Information

Please describe any personal or family financial circumstances that affect your need for financial assistance (for example, more than one family member in college, illness, disability, etc.)

Have you applied for any other scholarships? Of so, please list:

- 12. **References** (Please list two teachers and one personal reference. Include address and phone #.)
- 13. I hereby give my permission for the Scholarship Selection Committee to contact the references named above. I understand that all information that is discussed will remain confidential. Signature

Date

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14. I, _____, hereby acknowledge that all the information in this application is true and complete to the best of my knowledge. If additional information or documentation is requested of me, I will be pleased to furnish it. Signature

Date

15. Press Release

If chosen as the scholarship recipient, I give my permission for the release of any news story, photograph, and/or promotional material that the Scholarship Selection Committee may deem appropriate.

Date ______ Signature ______

REMEMBER:

All of the requested documents listed below must be included to be considered for the scholarship:

1.COMPLETED APPLICATION 2. ESSAY DESCRIBING YOUR EDUCATIONAL OR PROFESSIONAL GOALS 3. TWO WRITTEN REFERENCES 4. HIGH SCHOOL TRANSCRIPT